

Work Order ID 85548

85548

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Monday, June 11, 2012 10:06:27 AM

Item ID: D407-797-014 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Heli-Utility Basket, Light Weight Lid, RH
 Start Date: 6/8/2012 Start Qty: 1.00 ***1*** Cust Item ID:
 Required Date: 6/27/2012 Req'd Qty: 1.00 ***1*** Customer:
 Reference:

Approvals: Process Plan: MLJ Date: 12/06/12 Tooling: Date: Run Start ***NR1***
 QC: Date: SPC (Y/N): Date: Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
IIN-D407-797-1	B								

100 DOCUMENT CONTROL 0.00
100
 DC Memo 0.00
 Document Control Photocopy bluefile & type labels per PPPD407-797-014 CHG003

110 Pick Kit 0.00
110
 Packaging Memo 0.00
 Packaging ****Mask label plate to size of D4307 label, use scotchbrite red pad to lightly sand area for label, apply label ****

115 QC5- Inspect part completeness to step on W/O 0.00
115
 QC Memo 0.00
 Quality Control ***Inspect label on lid***

Handwritten signature

Handwritten signature

Handwritten signature

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Work Order ID 85548***85548***

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Item ID: D407-797-014

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Heli-Utility Basket, Light Weight Lid, RH

Start Date: 6/8/2012 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 6/27/2012 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date:

Run Start ***NR1***

QC: Date: SPC (Y/N): Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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120 QC4- 100% Inspect kits for completeness

0.00

120

QC

Memo

0.00

Quality Control

8/7/06/26

130 Pick Kit

0.00

130

Packaging

Memo

0.00

Packaging

Identify and pack for shipping as per PPP D407-797-014

Location: _____

PPP rev: _____

2/6/06

140 QC21- Final Inspection - Work Order Release

0.00

140

QC

Memo

0.00

Quality Control

MLJ 12/06/26

MF
12-06-26

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Picklist Print

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Work Order ID: 85548

Parent Item: D407-797-014

Parent Item Name: Heli-Utility Basket, Light Weight Lid, RH

Start Date: 6/8/2012

Required Date: 6/27/2012

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:A 10.11.29 new issue DD verf:JLM IPP Rev:B 11.02.10 as per IIN
rev.A DD verf:JLM IPP Rev:C 11.09.12 @ chg 002 DD verf:EC
IPP REV:D 12.03.06 AS PER ECN12-535 DD VERF:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
8 D407-797-111 Basket Mounting Installation	4167002	Manufactured	No			110	Each	0.0000	1	1	85548		
8 D4272-014 Basket Assembly, Lightweight Lid, RH		Manufactured	No			110	Each	0.0000	1	1	85501		
D4307-265 Placard, Max Load		Manufactured	No			110	Each	3.0000	1	1	NA		
N/A SUR D4272-014						<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>					
						ST107	3						
						66327	3						

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
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NOTE: Date & initial all entries